

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 23-CV-3155

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for (name of individual and title, if any) US Food & Drug Administration
was received by me on (date) 8/16/2023.

☐ I personally served the summons on the individual at (place) _____
on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
_____, a person of suitable age and discretion who resides there,
on (date) _____, and mailed a copy to the individual's last known address; or

☒ I served the summons on (name of individual) Nadya Brooks, who is
designated by law to accept service of process on behalf of (name of organization) United States
Attorney's Office for the EDPA on (date) 8/16/2023; or

☐ I returned the summons unexecuted because _____; or

☐ Other (specify): _____

My fees are \$ 0.00 for travel and \$ 1.90 for services, for a total of \$ 1.90.

(40 cents / page printing costs)
I declare under penalty of perjury that this information is true.

Date: 8/16/2023

Daniel J. Auerbach
Server's signature

Daniel Auerbach
Printed name and title

241 S. 6th St., #1902B
Philadelphia, PA 19106
Server's address

Additional information regarding attempted service, etc:

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on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
designated by law to accept service of process on behalf of (name of organization) _____
on (date) _____; or

☐ I returned the summons unexecuted because _____; or

☒ Other (specify): Certified U.S. mail to the FDA
per attached form.

My fees are \$ 0.00 for travel and \$ 10.73 for services, for a total of \$ 10.73.

(10 cents/page in printing costs plus VAPR charges)
I declare under penalty of perjury that this information is true.

Date: 8/15/2023

Daniel J. Averbach
Server's signature

Daniel J. Averbach
Printed name and title

241 S. 6th St., #1902B
Philadelphia, PA 19106
Server's address

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on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
designated by law to accept service of process on behalf of (name of organization) _____
on (date) _____; or

☐ I returned the summons unexecuted because _____; or

☒ Other (specify): certified mail to AG Merritt
Gerland per attached form.

My fees are \$ 0.00 for travel and \$ 10.75 for services, for a total of \$ 10.75.

(10 cents/page in printing costs plus USPS charges)
I declare under penalty of perjury that this information is true.

Date: 8/16/2023

Daniel J. Huerberl
Server's signature

Daniel J. Huerberl
Printed name and title

241 S. 6th St., #1802P
Philadelphia PA 19106
Server's address

Additional information regarding attempted service, etc:



CONTINENTAL
615 CHESTNUT ST LBBY
PHILADELPHIA, PA 19106-9997
(800) 275-8777

08/16/2023

04:03 PM

Product	Qty	Unit Price	Price
Mailer 10.5 x 16	2	\$1.69	\$3.38
First-Class Mail® Large Envelope	1		\$2.79
Silver Spring, MD 20993			
Weight: 0 lb 6.20 oz			
Estimated Delivery Date Sat 08/19/2023			
Certified Mail®			\$4.35
Tracking #: 70151520000161843420			
Total			\$7.14
First-Class Mail® Large Envelope	1		\$2.79
Washington, DC 20530			
Weight: 0 lb 6.10 oz			
Estimated Delivery Date Fri 08/18/2023			
Certified Mail®			\$4.35
Tracking #: 70151520000161843413			
Total			\$7.14
Grand Total:			\$17.66
Card Remit			\$17.66

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Washington, DC 20530

Certified Mail Fee \$4.35

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$2.79

Total Postage and Fees \$7.14

Sent To Merrick Garland

Street and Apt. No., or PO Box No. 150 Pennsylvania Avenue, NW

City, State, ZIP+4® Washington, DC 20530-0001

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Silver Spring, MD 20993

Certified Mail Fee \$4.35

Extra Services & Fees (check box, add fee as appropriate)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage \$2.79

Total Postage and Fees \$7.14

Sent To FDA

Street and Apt. No., or PO Box No. 10903 New Hampshire Avenue

City, State, ZIP+4® Silver Spring MD 20993-0002

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions